Identity-Centered Multicultural Care Theory: White, Black, and Korean Caring

By SoYoung Kang

Introduction

There is a very intimate relationship between how caring the teacher is and the knowledge that students gain. Actually, it is not limited to student-teacher relationships only but also student-student relationships. Knowledge is something people acquire as they build relationships and have interactions with others and the world around them. Depending on how caring the teacher is and the other students are, the students can improve their chances of becoming knowers. When people talk about someone being a knower, they tend to focus mainly on the pure knowledge they gain, instead of looking at the process of gaining knowledge. Care theory plays an essential role in the process of gaining knowledge and teachers or other care givers should pay attention to this process instead of only what they get as a result, which is knowledge. In other words, instead of teachers focusing on the resultcentered education such as assisting students to get good grades, they should pay more attention to learn the effective way of caring that can positively influence students and eventually assist students to receive better results.

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It is my desire to encourage people to realize the importance of care theory, but what should be more focused is valuing differences while the one-caring and the cared-for engage in caring relationships. It will be problematic if the act of caring is taken up from the teacher's perspectives instead of considering the students' perspectives since there is not a universal caring. Especially in the U.S. where it is known as the country of salad bowl due to being diverse, it is more important for teachers to become color conscious in their classrooms and acknowledge the differences of defining or conceptualizing caring between White, Black, and other ethnic or racial groups such as Korean in order to become more effective caring teacher. Many teachers used to think it was wrong to notice the race of their students since they thought everyone is the same (Johnson, 2002). In this paper, the analysis and the comparisons of White, Black, and Korean caring across different boundaries are provided. It is more of analyzing and comparing by looking at the whole picture which means that it is more of an overall analysis in sum. When people are asked about multiculturalism or multicultural education in the U.S., often times the answer is related to including and focusing more on Black culture along with White culture such as having Black History Month at school (Lewis, 2001). As myself being a Korean, the limitations of more popular understandings of caring are very evident to me and I decide to include Korean perspective of caring along with White, and Black caring since it brings another meaning to caring.

Throughout this paper, philosophical analyses such as ordinary language analysis, phenomenology, existential, and pragmatic are used to analyze the work. When I analyze, I value logical analysis/ ordinary language analysis by focusing on caring and how other people use the term in an effort to clarify this concept. According to pragmatism, philosophy should worry about real problems which we have, and it strives to relate theory to practice. From the view of pragmatism, we can realize that philosophy is not neutral, so one's own narratives are insufficient. Thus, it is necessary to add other people's voices in order to have a valid argument. Also I agree that according to pragmatists (Dewey, 1966; James, 1979; Peirce, 1958; Seigfried, 1996; Thayer-Bacon, 1998), we can never figure out an answer by ourselves since we are all limited beings. This is one of the reasons why I bring various philosophers' thoughts on care theory to explore and help me with the analysis. Phenomenologically, I tune into my personal experiences to help me explain Korean care theory. Since Korean care theory has somewhat distinctive approach compared to White and Black caring, due to the influence of Confucianism embedded in the society, more in-depth attention is placed on Korean care theory in the discussion. Then, I conclude this paper with my concrete explanation of care theory and offer another perspective.

Analysis of White, Black, and Korean Care Theory

There have been many valuable points which have been presented by White, Black, and Korean scholars, and all of them have made a great contribution to the field of care theory. As care theory can be situational, and varies depending on the people, it was somewhat distinctive to see how White, Black and Korean scholars have defined caring although there were some similarities and overlaps. It is clear that these differences on caring are derived from having distinctive cultures, different traditions and ways of thinking. Culture does not necessarily mean the people from different countries but it includes other categories like race, gender, class, religion, age, and so forth. In this research, caring from three cultures—White, Black, and Korean—is explored.

In presenting caring, several of the White feminists such as Gilligan (1995), Noddings (1995), Jaggar (1995), Houston (1998), and Applebaum (1998) often relate caring with ethics and contrast caring with the ethics of justice although there are several who relate caring with epistemology such as Ruddick (1989) and Thayer-Bacon (2003). Their explication of caring mainly tells us that it has culturally been associated as a feminine quality, and that it is relational. Many of them such as Noddings (1984) and Ruddick (1989) discuss caring in relation with mothering. Basically, they discuss caring in terms of men and women, and agree that caring which has more of women's quality should be valued. However, they emphasize caring should to be practiced by both genders. Although there are some differences between the first generation (Gilligan, 1982; Noddings, 1995; Ruddick, 1989) and the second generation (Applebaum, 1998; Houston, 1998; Jaggar, 1995; Thayer-Bacon, 2003) White feminists in describing care theory, they still share some similar points.

Noddings (1984) defines caring in terms of being receptive and feeling with the other. She also describes caring as always being relational, between the one-caring and the cared-for. According to Ruddick (1995), from the perspective of care, "relationships require attentiveness to others and response to their needs" (p. 204). In explaining caring, Thayer-Bacon (1993) focuses on the attitude of the one-caring and mentions that "an attitude of acceptance and trust, inclusion and openness, is important in all caring relationships" (p. 325). Thayer-Bacon (2000) also claims that "care involves an appreciation of the other and respect of the other; it is not something that is imposed on the other" (p. 23). Overall, many White feminists value the act of attending, empathy, being receptive, appreciation of the other, and respecting the other in caring relationships. Their discussion on caring focuses intensively on the act of caring such as how to be caring, and how to form a caring relationship but less emphasis is put on the uniqueness and the differences of each individual. For example, the act of attending or respecting can be taken from different angles by different people, and consequently it will have different meanings. Thus, without understanding the context of the people, it will be difficult to understand what caring means to each individual and act as a caring person.

Black feminists' view on care theory is somewhat different from White feminists. If White feminists' focus is mainly concerned with gender, Black feminists such as Collins' (1989, 1993, 1995, 2000), hooks (1994, 2000, 2001, 2003), and Thompson's (1998, 2003, 2004) focus is more on race and class issues. Due to the

fact that many Blacks experience racism, oppression, and poverty, their perspectives and approaches have been presented differently from White feminists. Collins (1993) and hooks (2001) mention about how survival is one of the key issues for them; surviving in the community, society, and in the country where they live, and caring cannot take place without considering this aspect. Black feminists' focus on survival does not limit to individual survival, but also group survival, and their ways of caring also developed along with this. In order to understand their view, it is important to include religion and political issues since both play an influential role in the Black community. It is like how tradition such as Confucianism (Park, 2002; Choi, 2002), and language are important factors for understanding the ways Koreans define caring. For a long period of time, the Christian church has played a supporting role for Blacks, and the Black church has deep roots in the African past and philosophy (Collins, 1993). It seems to me that African Americans value and put great emphasis on helping one another especially when it comes to caring. For example, in mothering, they also get support from other mothers in the community, and it is like supporting one another (Collins, 1995; Thompson, 2004).

Overall, Black feminists such as Collins (1993, 1995), hooks (1994, 2001), and Thompson (1998, 2003, 2004) value uniqueness, personal expressiveness, emotions, empathy, dialogue, and cultural specificity in caring relationships. It is the opposite from how Koreans view caring. For Koreans, often times, it is rather considered as caring and being considerate to others if one keeps personal expressiveness and emotions away from others. Koreans are more reserved and conservative in presenting their feelings openly to others. However, African Americans also have some similarities with Koreans for focusing on the collectivism and valuing the group although it is not done exactly the same way. While African Americans value the group, they value individuals as much as the group. On the other hand, Koreans tend to value the group, and not much of individuals. Most Koreans tend to think from other people's perspective, and sometimes they tend to focus too much on how others will think and feel about them which then become a problem for them. Sometimes they are restricted from doing things which they really desire to do. In this case, we can say that Koreans are good at respecting others, especially the ones who are intimate, but they are not good at respecting themselves.

Park (2002) expresses how Korean care is sometimes problematic due to providing 'excessive caring' to the ones who are intimate. The example he provides for excessive caring is "the excessive family individualism, regionalism, school relations, and connectionism" (p. 162). It means that Koreans value the connections they have with others, and consider those connections as intimate, and care for others excessively. On the other hand, others who are not connected will be ignored often times, and the people will not even bother to care for those others. 'The family individualism' can be interpreted as 'family oriented' but the reason why Park uses it as 'family individualism' is due to excessively focusing and valuing only the family members which can be interpreted as individualistic or selfish from the perspective of non-family members. It can be considered as another form of discrimination.

In discussing caring, Koreans focus more on gender than on race. Although Koreans bring gender into defining care theory, it is different from how White feminists (Gilligan, 1982; Noddings, 1984) raise the issue. Instead of defining caring as a feminine quality, Koreans divide it into masculine and feminine caring. Both forms of caring are valued in terms of their distinctive roles although if we weigh which caring is more important, masculine caring gets more credit. It shows that the men's caring is more valued than the women's caring in the community, except for the childcare which is viewed as a woman's job. Mostly, White and Black feminists (Collins, 1995; Noddings, 1984; Ruddick, 1989; Thompson, 2004) often relate caring with mothering, but although Koreans sometimes do focus caring with mothering, caring is rather related with other qualities. The concept 'caring' is more used for family caring than caring for individuals or children. Choi (2002) explains that "ethical perspective of caring is pursuing a moral model that emphasizes mutual reliance instead of individualistic autonomy, and caring for family and valuing the relationship of between parents and children" (p. 322).

Due to too much emphasis on love and responsibilities in caring, many onescaring tend to sacrifice themselves to meet those criteria in caring relationships with others. For example, parents and teachers see love and care as the responsibilities of the one-caring. Won (2003) mentions that teacher's devotion and sacrifice are considered as being caring, and Koreans see them as good qualities of a caring teacher. Throughout Won's work, he emphasizes the importance of love and care in education by claiming that these are something that cannot be excluded in education. He claims that "the school can be operated without love and care, but education cannot. Education is ultimately changing people's mind/mentality. The mind cannot be solved logically" (p. 131). Koreans often relate love with caring in discussing the teacher-students relationship. According to his description, teacher's sacrifice and endurance can lead to students' success. Being considerate of others is important in caring relationships; however, if the focus goes beyond that and starts to intrude upon one's personal life, it will be problematic. We should learn how to respect and care for ourselves first, in order to respect and care for others effectively. This is a key problem for Korean collectivism since not much focus goes to each individual, but the emphasis is more on the group and others who are related to them in some ways.

Drawing from personal experiences and looking at people's relationships, it is recognizable that in Korea, when the topic comes to caring, the focus is mainly on the 'caring role' as caring being divided into masculine and feminine caring. Here, the focus on the role is not limited to men and women's role, but it also is the case for the roles of parents (taking care of children's health, education, morality, etc), teachers (taking care of students by sending them to a good university, so that they can get good jobs and succeed in the society and become happy), younger people (respecting older people), and so forth.

In understanding Korean caring, people need to realize that 'age' and 'power/ authority' play important roles in caring relationships. Since caring is considered

as only powerful people's privilege in Korea, and only powerful people can care for the weaker people, care is described often from that perspective. It is like the weaker people should not dare to care for the powerful people and the weaker people are not qualified to care or not qualified to be in the role of caring. However, this issue of privilege does not necessarily equate with the idea that oppressed people cannot care for the oppressor because the weaker people are not always oppressed. For example, compared to older people, younger ones are considered as weaker in status in Korea, but it does not always mean that they are oppressed. The word 'oppression' is related to being treated unjustly and there is a feeling of dissatisfaction from the side of the oppressed. Since the younger Koreans, who are in the lower level of the hierarchy due to their age, do not think they are treated unjustly by the older people, but consider their relationship as a form of respect, they do not relate their situation with oppression. Due to Korean tradition and the influence of Confucianism (Choi, 2002; Park, 2002), people take this relationship rather more naturally and actually look highly of the relationship where respect for elders is valued.

We have to realize that most Koreans value respecting elders and positively agree that elders are in the higher rank. This also explains how Korean relationships are built in hierarchy (Choi, 2002) which is related to issues concerning power, but this power issue is somewhat different from American culture since Korean power is intensively related to age. As age plays an important role in human relationships, and it is related to respect, younger people are expected to respect older people. Here, the intension is not to say that Americans do not respect older people, but the way the relationship works is different. In America, people can still become friends and treat each other equally although there is a difference in age. For example, a son or a student can tap on father's or teacher's shoulders in America and it can be considered as a friendly gesture. However, in Korea, if younger people tap on older people's shoulders, it will be considered as a form of disrespect. Koreans also tend to focus more on the age than the name of the person which indicates 'who you are.'

Usually when the issue is related to power imbalance, it is considered as problematic as it is against social justice since it can be described as a form of discrimination and inequality. Maybe if the issue is on gender inequality, Korean women will react more sensitively and see it as an unjust power balance which is problematic. With more women working and gaining knowledge, there is a chance of men and women gaining equal ability in the society. With this opportunity, if the women do not get equal treatment, they will consider it as unjust. However, in Korea when power imbalance occurs between people due to age difference, they consider it as something natural or good, and actually encourage people to accept that fact. It is related to respect for elders which is rooted in Confucianism and Koreans take it positively. In addition to this, due to the language structure, the hierarchy formed due to the age cannot be completely removed. Koreans believe that one of the ways to bring harmony in the community is by respecting older people, and this is why hierarchical relationships can be viewed as an ethical ladder (Gutek, 2005).

As we can see, in understanding Korean care theory, exploring their tradition

such as Confucianism is important. I am not arguing that Confucianism is great and we should all take its perspective, but rather saying that Korean care cannot be fully understood without understanding the tradition of Confucianism and its influence on society and people. Koreans mainly focus on collectivism and value of the group, especially family, instead of individuals. Thus, individual sacrifice is necessary in order to care for the group especially if it is for the family members (Choi, 2002). Although African Americans emphasize collectivism, it is done in a different way since they respect and value each individual along with the group while Koreans tend to focus more on the group by sacrificing individuality.

To sum up, when Koreans use the term 'caring', it is often from (1) the men caring for the women, and (2) the stronger (powerful) person caring for the weaker (less powerful) person such as the parents caring for the children, the teachers caring for the students, and younger people caring for the older people, and the boss caring for the workers. It is like 'independent party' versus 'dependent party', and independent party cares for the dependent party. Korean caring seems to focus more on leading and providing caring rather than on the act of attending and receiving which White feminists (Noddings, 1984; Ruddick, 1995; Thayer-Bacon, 1997) discuss in depth. In Korean caring, the responsibility is on the person who is in the role of caring, and the cared-for is more in the role of passively accepting the care which has been provided to him or her as well as respecting the one-caring. The cared-for should be somewhat obedient to the one-caring. This is the way for the cared-for to care for one-caring, by accepting his or her caring.

Method-Centered, Difference-Centered, and Role-Centered Care Theory

After examining White feminists, Black feminists, and Korean scholars' care theory, I have realized that their approaches to caring varies. Overall, White feminists' focus on caring is more on 'how': 'how to care' and 'how to become a caring person', which is a 'method-centered caring'. Although the second generation White feminists try to bring in the value of differences which has been ignored by many of the first generation White feminists, they still pay great attention to the attitudes of the onecaring in caring relationships. They discuss intensively on the method of being an effective caring person. For example, in explaining caring, White feminists (Noddings, 1984; Ruddick, 1995; Thayer-Bacon, 1997) emphasize how the one-caring should be attentive, empathetic, receptive, and respecting. Of course it is important to know how to be caring, and realize what falls under caring attitudes, but the focus should be put on understanding the person, the cared-for first. Without understanding the subject, it will be more difficult to become a caring person, but if one has an idea of the cared-for's identity, it will be much easier and more effective for the one-caring to be in the role of caring. Here, I am not completely declaring that White feminists ignore the cared-for, but what I am claiming is the fact that they emphasize more on the method and study intensively on 'how' to be caring and they focus less on actually trying to explore and understand differences of the cared-for.

Black feminists' caring focuses on 'who': 'how to care for a unique person'. and it is more of 'difference-centered caring', although their difference-centered caring is often limited to Blacks. Their focus is on including the marginalized or the oppressed people in caring relationships which is a social justice issue. They value how each individual is distinctive and they claim that these differences should not be ignored but seriously examined in the application of caring. According to Black feminists, colorblindness (Thompson, 1998) will distract the one-caring from becoming a caring person, so it is important for people to be color vivid, meaning that they should be alert in recognizing racial differences. In order to understand each individual better, Black feminists such as Collins (1993, 2000), hooks (2001), and Thompson (1998, 2004) also recommend people should not overlook religious or political backgrounds of the cared-for, since understanding these backgrounds will well explain where each individual is coming from and how he or she is influenced by those factors. In emphasizing the importance of each individual's uniqueness, Collins (1993) and hooks (2001) also argue that not only race but also class can make people distinctive. Since upper class Blacks will not necessarily share the same value systems as lower class Blacks, it is important to recognize these class differences as well. By presenting their value of collectivism and community-based caring, which is distinctive from White Americans, they emphasize the uniqueness and differences of people in explaining care theory.

On the other hand, Korean caring emphasizes 'what': 'what is the role or responsibility of one-caring and cared-for, how to care for the group, and each person in that group', and it displays a 'role-centered caring'. All relationships in Korea are built on the hierarchical ladder. In this hierarchical ladder, everybody has their own responsibilities and roles. They are aware of what they need to do with other people. There are set rules for interacting with others and maintaining relationships. According to Gutek (2005), "the concept of hierarchical relationships can be viewed as an ethical ladder; each person has a connection with the person on the rung above or below" (p. 19). On the other hand, from a cultural studies perspective, this hierarchical ladder can be viewed as an issue of inequality and the dominance of oppressors. Since the people who are in the higher position on the ladder will be considered as having more power, the people in the lower position will be considered as having less power, and the relationship is based not on equal ground, but rather on a power imbalance. What makes the power imbalance less problematic is that eventually everyone moves up the ladder as they age. This hierarchical ladder is something which cannot be completely removed from Korean culture due to the tradition of Confucianism and the formation of the language. As Gutek (2005) mentions, "the idea of an ethical hierarchy is considered necessary to creating and maintaining social harmony: everyone standing on the social ladder will know her or his place, duties, and responsibilities and the proper way of performing these duties" (p. 19). This is just a different way of respecting people.

According to White or Black feminists, the definition of respect begins with treating people 'equally', but according to Korean perspective, respect is treating

people 'accordingly,' based on their status, especially with consideration to age. Overall, both forms of respect should be valued equally since it is related to cultural difference. There is not a universal way for respecting people, just like there is not a universal way of caring. However, role-centered caring is contrary to what Houston (1998) says about how good caring is situational. Since too much attention is paid to the roles in Korean caring relationships, sometimes less attention is paid to the perspective of the cared-for in the caring relationships. In agreement with Noddings (1984, 1992), I suggest that caring can be identified as caring only when the cared-for receives it, but if each individual is not being focused on their differences, how can we say that we are caring for that person? The one-caring should work more on looking at individuals as they are with considerations of their different situations.

By looking at White, Black, and Korean care theory, we can distinguish how people from different background approach the same topic differently. The way they describe, interpret, and apply caring are distinctive depending on their cultures and different situations. What we, as the one-caring, should do is consider care theory more from multicultural perspectives by accepting pluralism, as there is not a universal form of caring.

Multicultural Care Theory

Human beings are socially constructed and constantly influence one another in constructing knowledge. Since we live in the world with people, not by ourselves, we need to learn how to live together in a more pleasant environment where everyone can be valued and respected. In order to build positive and healthy relationships with people, it is essential for us to learn how to care for each other effectively. When the topic comes to care theory, many people tend to believe there is a universal caring. This is when people see caring in the majority setting and take that majority view to be the norm. It is problematic if people try to apply what is considered as the norm to everyone else including ones who do not belong to that setting. The one-caring should be more open to the voice of marginalized people who are neglected. It is important that we learn how to care for people differently, not in the same way. Since everybody is unique, treating people the same way will actually end up discriminating against people. Instead of thinking that the world is a melting pot, we need to see it as a salad bowl, where we see each ingredient or individual more distinctively rather than just mixing them together and seeing them as one. That is what we need to do for care theory as well. However, if we only focus on differentiating, people would not have anything in common. In other words, we also need to see what we have in common along with what we have in difference.

Overall, I value how Black feminists work on avoiding the problem of colorblindness (Thompson, 1998, 2003) in care theory, but it seems to me that their perspective focuses mainly on people who are oppressed and marginalized. I also want to claim that what is more important is not only including oppressed people

in caring, but including all minorities in general by valuing their uniqueness since being a minority does not necessarily mean that they are oppressed. Looking at each individual's identity will assist the one-caring to understand the cared-for, and it can lead people to achieve more effective caring relationships. Here, the intension is not trying to put all the burdens of caring on the shoulders of the one-caring, and excluding the cared-for's role as caring. Since caring should not be unidirectional but should come mutually, the cared-for can also be in the role of caring. However, I will use the term 'the one-caring' in explaining caring, not only for the actual 'one-caring' but also for 'the cared-for,' since once the cared-for plays the role of caring, he or she also becomes 'the one-caring.'

According to Milbrey McLaughlin (1993) "young people construct their identities within these embedded, diverse, and complex environments, a reflection of such elements as local political economy, peer relations, family circumstances, civic support, churches, schools, and neighborhood-based organizations" (p. 35). His statement well explains how people's identities are influenced by the various communities they belong to, and it will be important for the one-caring to see these communities as a key source to gain knowledge about the cared-for. In other words, his statement demonstrates how the individual is strongly related to the group and also influenced by one's community in formulating one's characteristics. In addition to this, the communities which the individual belongs to can affect and impact the development of their qualities and identity as a whole.

According to Michael Clifford (2001), "the individual, then, is not a basic unit. It is a fabrication—a product of specific, historically contingent, discursive and nondiscursive practices that define roles, relations, positions, statuses, freedoms, capacities, natures, even sexuality" (p. 99). As a matter of fact, people cannot live by themselves but they are socially constructed, and this is why we cannot say that we understand the person without looking at the context. Looking at institutional support, group affiliation, and the role of the individual in relation to society as a whole will definitely help in gaining knowledge of the person's identity.

In discussion of identity, Michel Foucault (1980) says that "the individual is not a pregiven entity which is seized on by the exercise of power. The individual, with his identity and characteristics, is the product of a relation of power exercised over bodies, multiplicities, movements, desires, forces" (p. 73). Since people are constantly influenced by their context, it is important to understand the context of the people in order to understand their identities. Looking at the cared-for's position in the community will also help in understanding the formation of his or her identity. Examining the identity of the cared-for is not only recommended, but it will be more of a 'must', especially when it comes to caring.

Without understanding the subject of the caring which is the cared-for, the act of caring cannot exist. Only after understanding individuals with reference of their identities, will the one-caring be enabled to use the method of caring such as being empathetic, receptive, attending, and respecting in caring relationships. The way people attend, or people expect others to attend to them can vary as well. It is like

how the issue of respect can mean different things in different cultures. Without acknowledging the differences in interpreting attitudes and looking at worldviews, the act of attending or respecting will be meaningless.

In observing identity, we also need to focus both on 'the given identity' and 'the formed identity.' The given identity can be something one was born with, which people have no choice of. It can be called involuntary identity. For example, age, gender, place of birth, biological parents, color of skin are all factors that form one's identity involuntarily. On the other hand, formed identity is one that has been developed after birth, by oneself as well by people around that person. Formed identity is the identity that is 'becoming,' and it is more of a voluntary identity although sometimes there is an involuntary quality to this as well since we learn through acculturation. Here, I am claiming that people can form their own identity by interacting and relating with others. That is why it is important to look at culture in understanding people, and in caring relationships. However, we have to avoid generalizing culture. It should be only used as a tool to understand and narrow down in gaining knowledge of individuals, since within the culture, there are many other subcultures as well.

As cultural studies tries to take what has been traditionally neglected more seriously, the one-caring also needs to take the perspectives of previously marginalized groups in the society more seriously and cautiously while engaging in a relationship with the one-cared for. It is important to recognize that the one-cared for does not always come from the same cultural background with the one-caring and vice versa, and he or she might have different interests. If acknowledging these differences is excluded in performing caring, and if the one-caring only interacts and relates with the cared-for from his or her own point of view, it can be considered as manipulating or misusing power, and dominating without using force, from the perspective of the cared-for. The act of discrimination does not only mean treating people differently, but it also means ignoring or not recognizing differences. The one-caring should be sensitive to the uniqueness of the cared-for, and avoid generalizing or universalizing.

Along with this, we need to focus on becoming better 'world travelers' (Lugones, 1987). I mean world traveling in a sense to traveling to other people's inner mind to understand each individual from their own worldview. We cannot become that person and we cannot completely understand others, but we should still try to travel to that individual's mind and experience what he or she is going through since it will definitely help the one-caring to enlarge his or her views on understanding the cared-for. Everybody is living in his or her own small world, and each world is distinctive, like how each country is unique. Although all the countries are located in the same earth, they are very distinctive in their customs, traditions, language, food, mentality, and in many other ways. If we try to speak English to non-English speakers, will they ever understand what we are trying to say? This is what needs to be focused on in caring relationships. The need is to find a common language, and I do not mean literal language here. The one-caring cannot constantly speak to

the cared-for in his or her own language and interpret it as caring, if the cared-for does not even understand a thing. They should try to work on finding a common language or common ground, and it needs to be done at the initial stage of building a caring relationship.

Lastly it is also important to pay attention to cultural relativism which is a philosophical concern. Philosophers as varied as Harvey Siegel (1997) and Charles Sanders Peirce (1958) can criticize me and express concerns about cultural relativism in terms of my multicultural care theory. Multicultural caring can be viewed as problematic due to having the false assumption that people cannot talk to each other across cultures because people only understand people within their culture. This is a philosophical problem of incommensurability. Another concern that philosophers might have is the fact about there is no way to judge others. If caring is culturally contextualized, how can we define what is good caring and what is harmful? For example, what is right in one culture such as caning being viewed as a form of caring, might be viewed as something wrong in another culture since it can be viewed as a form of physical abuse instead. These questions can be raised by philosophers concerning my multicultural approach to caring.

In explaining absolutism, Siegel (1987) says that absolutism allows us to be fallible but still does not embrace pluralism and claims that we need a concept of absolute in order to be able to argue what is right and wrong. We make mistakes but still we need to have the answer. If we get rid of absolute truth, we cannot judge. According to Siegel, relativism is incoherent, self-defeating, arbitrary, or impotent. Overall, Siegel puts absolutism and relativism aside and embraces what he calls a non-vulgar absolutism, and explains that it offers "the possibility of objective, non-question-begging evaluation of putative knowledge-claims, in terms of criteria which are taken as absolute but which nonetheless admit of criticism and improvement" (p. 162).

According to qualified relativists such as Thayer-Bacon (2003), "the construction of knowledge is social, interactive, flexible, and on-going" (p. 113), and we have to recognize our limitations and think that we could be wrong. Thayer-Bacon argues that "(e)pistemological fallibilism entails (e)pistemological pluralism" (p. 49). In addition to this, she argues that "democratic communities always-in-the-making are what protect us from fears of vulgar relativism, as we openly argue and discuss and debate our concerns within our own communities as well as among other communities, even communities we can only imagine" (p. 49). Overall, Thayer-Bacon places emphasis on "the social negotiating process that inquiry must go through, to help us settle our doubts and satisfactorily end our inquiry" (p. 72). Here, in agreement with qualified relativism, I want to argue that it is possible for caring to be embedded within a cultural context but at the same time, we can make general claims about what counts as 'caring,' across cultural boundaries. Thus, people can understand caring in another culture and with the help from the outsiders and vice versa, we can help each other to enlarge our thinking and play the role of the onecaring more effectively.

Conclusion

Overall, in this paper, I want to claim that the key point in care theory is caring 'accordingly' depending on the person and the situation. Providing equal opportunities to people is important in society, but it does not mean that everyone should be treated the same way. Treating people unjustly is wrong, but treating people differently is rather fair and just. This is the way the one-caring should focus on caring for the cared-for. For example, attending, respecting, being receptive accordingly to each individual and their needs, and valuing their uniqueness, is what the one-caring should focus upon. Taking each individual's identity into consideration and trying to understand the individual from that perspective will lead the one-caring to accept the cared-for as how he or she is 'being,' since identity indicates 'who a person is, or the qualities of the person.'

We have to remember that there is not a universal caring, but try to see caring as 'multicultural caring' and 'multicultural care theory,' like how there are some fields such as multicultural counseling, multicultural education, and other multicultural disciplines or discourses. We need to learn how to value diverse peoples' differences in understanding them and building and maintaining caring relationships. The most important thing in the caring relationship is understanding the cared-for, and his or her identity. Without understanding the person and the culture, the one-caring cannot play the role of caring effectively. For example, caning which is a form of physical punishment is illegal in the U.S. whereas in some countries in Africa and Asia, it is still legal and considered as a form of care and a good way to discipline students and children. Until the recent past, teachers caning students for discipline was legal and common in Korea as well. Actually parents also wanted teachers to discipline their children, and parents did not mind if their children needed to be caned. Usually, teachers used a stick to hit students' palms. The parents trusted the teachers and gave them the responsibility of disciplining their children while they are at school. It was a form of respect. Students also did not mind getting caned by their teachers even though it hurts. It was natural for teachers who are on the higher level in the hierarchy to discipline students and nobody really questioned about it. It was viewed as one way of expressing teachers' care to students. This is why people call it 'love cane'. Thus, without embracing multicultural caring by understanding and accepting the cared-for's identity and the culture, the one-caring will only limit oneself to general caring which will lead to unsuccessful caring relationship.

This research well explains the importance of going beyond the color-blind approach in order to care effectively but at the same time it also suggests how people should be cautious of not dwelling only in the color conscious stage. In other words, as Johnson's (2002) interviewee Diane explains, the definition of personal culture should include "an individual's class background and sexual orientation as well as racial and ethnic affiliation" (p. 161). Multicultural caring or identity-centered multicultural care theory does not necessarily focus on considering only the racial

differences but other differences such as class, gender, religion, age, exceptionality and so forth should be carefully examined as well. Teachers need to teach students to value other people's differences and help them to realize that these differences do not carry negative meanings. Additionally, if needed, teachers should not hesitate to get trained first and feel confident before they teach the importance of multicultural caring or other multicultural issues to their students.

On top of that, caring is not something that we stop once we feel that it is positively progressing, but it is something that we need to continuously express and work on while we are engaged in caring relationships with others. At the same time, we have to remember that multicultural caring or multicultural care theory does not mean that general claims about what counts as good caring cannot be made, or that people from another culture cannot understand each other's caring views and practices. People can understand caring in another culture and with the help from the outsiders and vice versa, we can help each other to enlarge our thinking and play the role of the one-caring more effectively.

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